1407397

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	April 30, 2008						
Estimated ave	rage burden						
hours per respor	se 16.00						

	SEC	USE ON	ILY
	Prefix		Serial
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		1	

Name of Offering Unit Purchase Agriculant	
Filing Under (Check box (as) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	07071847
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	·
TKK Holdings, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) 5200 Town Center Circle, Suite 470, Boca Raton, Florida, 33486	Telephone Number (Including Area Code) (561) 394-0550
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	<del>-</del>
Holding company	PROCESSE
D. Distinct representation to be formed	ease specify): JUL 2 4 2007 ability company, already formed
Month Year  Actual or Estimated Date of Incorporation or Organization: 1 2 0 6 X Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	THOMSON

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

[D][E]

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## -ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Sun TKK, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 5200 Town Center Circle, Suite 470, Boca Raton, Florida, 33486 Check Box(es) that Apply-Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Sun Capital Partners IV, LP Business or Residence Address (Number and Street, City, State, Zip Code) 5200 Town Center Circle, Suite 470, Boca Raton, Florida, 33486 Check Box(es) that Apply-Beneficial Owner | Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Leder, Marc J. Business or Residence Address (Number and Street, City, State, Zip Code) 5200 Town Center Circle, Suite 470, Boca Raton, Florida, 33486 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Krouse, Rodger R. Business or Residence Address (Number and Street, City, State, Zip Code) 5200 Town Center Circle, Suite 470, Boca Raton, Florida, 33486 Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply Beneficial Owner Executive Officer Director Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
 L.	Has the	issuer sole	I, or does th	he issner it	ntend to se	ll to non-a	ccredited i	nvestors in	this offeri	ine?		Yes	No X
••	rras tric	155441 5014	a, or does a			Appendix.							
2.	What is	the minim	um investn			• •		_				\$ \$5,0	000
												Yes	No
3.												$\boxtimes$	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		Last name	first, if ind	ividual)									
	one siness or	Residence	Address (N	lumber and	d Street Ci	ity State 7	in Code)						
i)u.	3111033 01	residence	Addiess (1	dinoct and	a Street. C	ny, otate, z	np code;						
Nai	me of Ass	sociated Br	oker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers			·			
	(Check	"All States	s" or check	individual	States)			••••••	.,,			☐ Al	l States
	AL	ΛK	ΔZ	AR	CA	CO	CT	DE	DC	FL	GΛ	HI	ID
	II.	[N]	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE)	NV (ED)	NH]	NI	NM	NY	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	RI	[SC]	SD	TN	TX	UT	[VT]	VA	WA	<u>(W. V.)</u>	(WI)		[FK]
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	: Address (1	Number an	d Street. C	lity. State. 2	Zin Code)						
Nai	me of Ass	sociated Br	roker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All States	s" or check	individual	States)	43135+*************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····			******************		l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NŸ	(NC)	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA]	[WA]	[WV]	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)		•							
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of Ass	sociated Bi	oker or De	aler		<del></del>							
Star	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All States	" or check	individual	States)	*************			•••••			☐ AI	l States
	AL	ĀΚ	$\overline{\mathbf{AZ}}$	AR	CA	CO	CT	DE	DC	FL	GA	Ш	$\Box$
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amou sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offer this box and indicate in the columns below the amounts of the securities offered for excalready exchanged.	ing, check	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s_0	\$_0
	Equity	s_0	\$ <u>0</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$ <sup>0</sup>
	Partnership Interests		\$_0
	Other (Specify Limited Liability Company Units)		\$_3,366,153.33
	Total		\$ 3,366,153.33
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 50 the number of persons who have purchased securities and the aggregate dollar amount purchases on the total lines. Enter "0" if answer is "none" or "zero."	4. indicate	Aggregate
		Number Investors 3	Dollar Amount of Purchases § 3,366,153.33
	Accredited Investors		<b>-</b>
	Non-accredited Investors		\$ 0 \$ N/A
	Total (for filings under Rule 504 only)		\$_14/A
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months p first sale of securities in this offering. Classify securities by type listed in Part C — Qu	rior to the	
	Torre of Official	Type of Security	Dollar Amount Sold
	Type of Offering  Rule 505	NTIA	<sub>\$</sub> N/A
	Regulation A		\$ N/A
	Rule 504	N1/A	₅ N/A
	T	N/A	s N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an expense known, furnish an estimate and check the box to the left of the estimate.	ion of the he insurer.	3 <u></u>
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs		\$ <u>0</u>
	Legal Fees		\$ <u>0</u>
	Accounting Fees		<u>\$</u> 0
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		<u>\$</u> 0
	Other Expenses (identify)		<u>\$</u> 0
	Total		¢ 0

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."			§ 3,366,153.33
i.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		] \$ <u></u>	□ \$ <u>0</u>
	Purchase of real estate			. 🗆 \$_0
	Purchase, rental or leasing and installation of mac and equipment	hinery [	] \$ <u></u>	s_ <u></u>
	Construction or leasing of plant buildings and faci			s_0
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	¬\$_0	∑s_3,366,153.33
	Repayment of indebtedness	_	-	
	Working capital		\$_0	. <b></b> \$
	Other (specify):		<u> </u>	□ \$ <u>0</u>
			\$ <u>0</u>	s_ <u></u>
	Column Totals			∑s 3,366,153.33
	Total Payments Listed (column totals added)		<b>⊠</b> \$ <u>3</u>	,366,153.33
_	-	D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	sion, upon writte	
SSI	uer (Print or Type)	Signature / April [	Date	
Γķ	LK Holdings, LLC	Machael Momey	July 16, 2007	
la	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
M:	chael J. McConvery	Vice President of the Issuer		
		· · · · · · · · · · · · · · · · · · ·	,	

--- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.		230.262 presently subject to any of the disqualification Yes No							
		See Appendix, Column 5, for state response.							
2.	<ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.</li> </ol>								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	limited Offering Exemption (ULO	that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform E) of the state in which this notice is filed and understands that the issuer claiming the availability of establishing that these conditions have been satisfied.							
	ner has read this notification and know thorized person.	vs the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned							
Issuer (	Print or Type)	Signature Date							
TKK I	Holdings, LLC	Muchael McCombin July 16, 2007							
Name (	Print or Type)	Title (Print or Type) Vice President of the Issuer							
Micha	el J. McConvery								

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PPENDIX				
1	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	1	X	*	0	0	0	0		×
AK		X	*	0	0	0	0		×
ΑZ		X	*	0	0	0	0		×
AR		X	*	0	0	0	0		×
CA		×	*	0	0	0	0		×
СО		X	*	0	0	0	0		X
СТ		X	*	0	0	0	0		X
DE		X	*	0	0	0	0		×
DC		X	*	0	0	0	0		×
FL	,	X	*	ı	3,029,538	0	0		×
GA		X	*	0	0	0	0		×
НІ		×	*	0	0	0	0		X
ID		X	*	0	0	0	0		×
IL		X	*	0	0	0	0		X
IN		X	*	0	0	0	0		. <b>X</b>
ΙA		X	*	0	0	0	0		×
KS		×	*	0	0	0	0		X
KY		X	*	0	0	0	0		X
LA		×	*	0	0	0	0		×
ME		X	*	0	0	0	0		X
MD		×	*	0	0	0	0		X
MA		×	*	0	0	0	0		×
МІ		×	*	0	0	0	0		×
MN		X	*	0	0	0	0		X
MS	,	×	*	0	0	0	0		×

				APP	ENDIX					
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		×	*	0	0	0	0		X	
МТ		×	*	0	0	0	0		X	
NE		X	*	0	0	0	0		X	
NV		×	* 0	0	0	0	0		×	
NH		X	* 0	0	0	0	0		×	
ľИ		X	*	0	0	0	0		×	
NM		X	* •	0	0	0	0		X	
NY		X	*	0	0	0	0		×	
NC		X	* +	0	0	0	0		X	
ND		X	* 0	0	0	0	0		X	
он		X	* 0	0	0	0	0		X	
ок		X	* •	0	0	0	0		×	
OR		X	* =	0	0	0	0		×	
PA		X	* 0	0	0	0	0		×	
RI		X	*	0	0	0	0		X	
SC		X	* 0	0	0	0	0		X	
SD		X	* 0	0	0	0	0	ļ. <del>-</del>	X	
TN		×	* 0	0	0	0	0		X	
TX		×	*	0	0	0	0-		X	
UT		×	*	0	0	0	0		×	
VT		×	*	0	0	0	0		X	
VA		X	*	0	0	0	0		×	
WA		×	* =	0	0	0	0		X	
WV		×	*	0	0	0	0		X	
WI		×	* 5	0	0	0	0		×	

	APPENDIX									
1	:	2	3		4					
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under State ULOF (if yes, attach explanation of waiver granted) (Part E-Item I)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		×	*	0	0	0	0	!	X	
PR		×	*	0	0	0	0		×	

